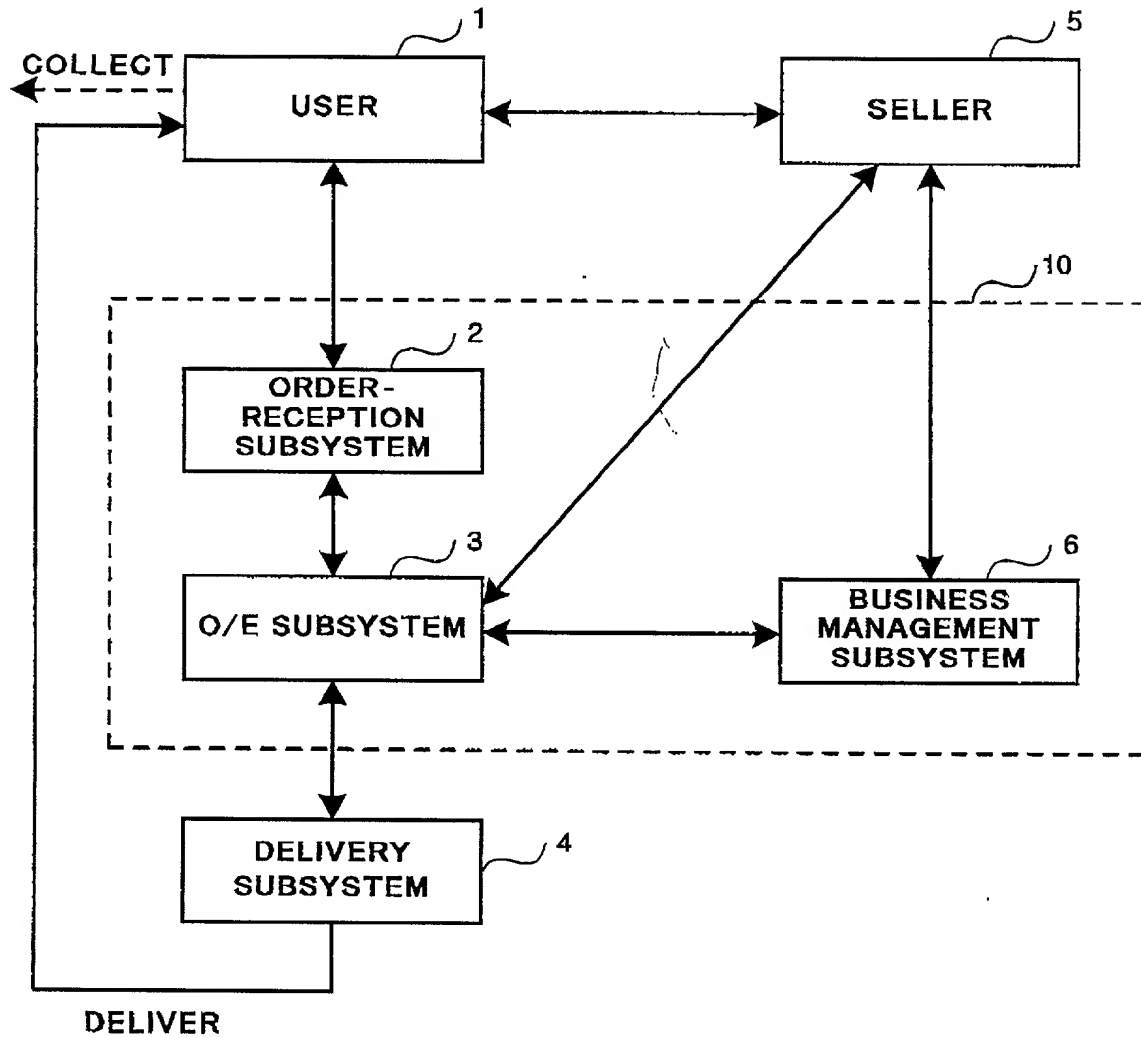


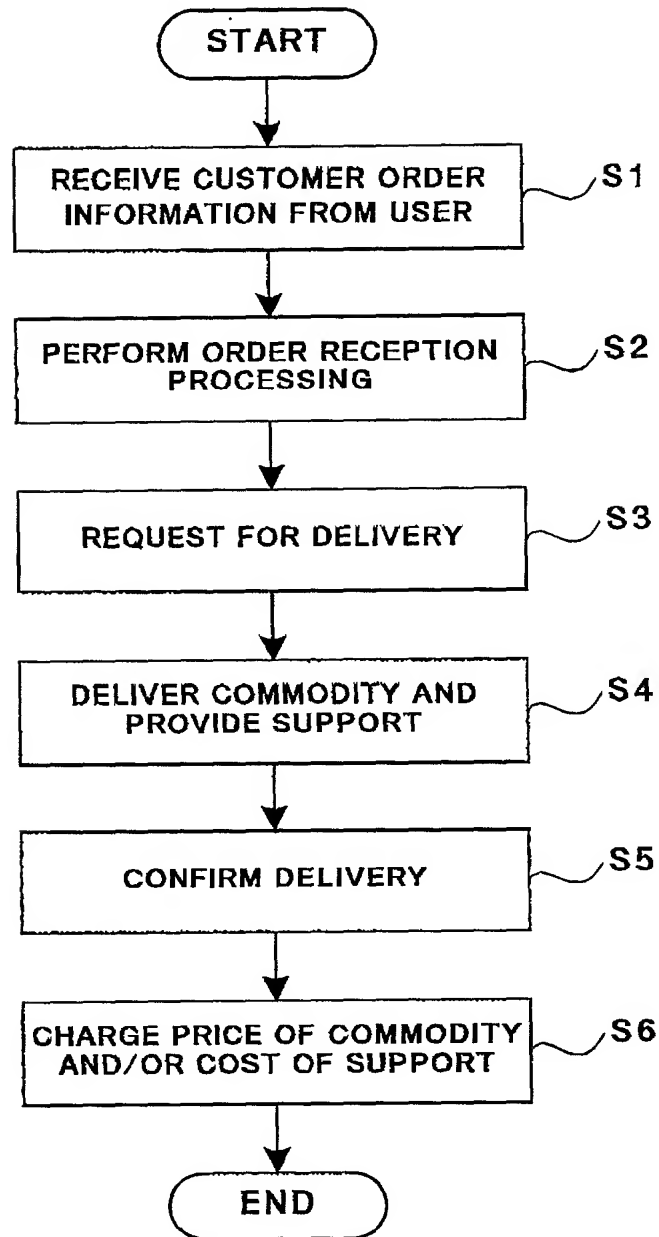
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FIG. 1



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FIG.2



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FIG. 3

COLLECT TONER CARTRIDGE
COLLECT TONER CONTAINER
COLLECT USED PAPER
DELIVER COMMODITY TO SPECIFIED PLACE
DELIVERY ITEM TO REPLACE UNNECESSARY ITEM
UNPACKING COMMODITY AT A TIME OF DELIVER
COLLECT EMPTY BOXES
SPECIFY DELIVERY DATE
URGENT DELIVERY
PERIODIC DELIVERY OF CONSTANT NUMBER

FOR COMMODITIES

Inventor: Hideyuki MORI et al.

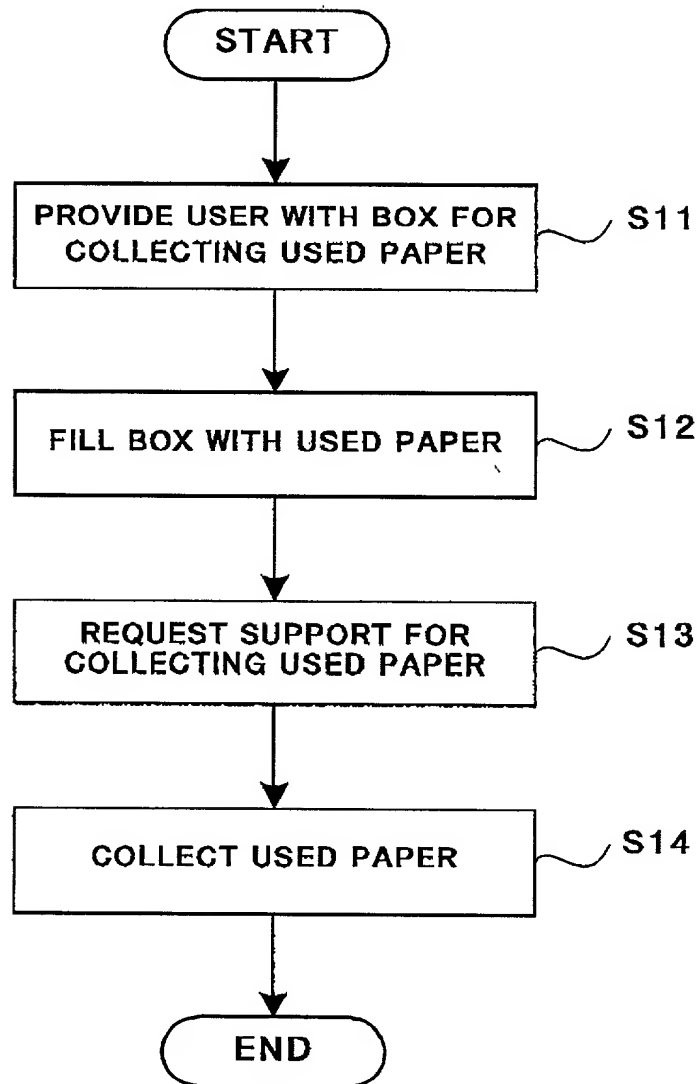
Application No.: to be assigned

Docket No.: 11669200100

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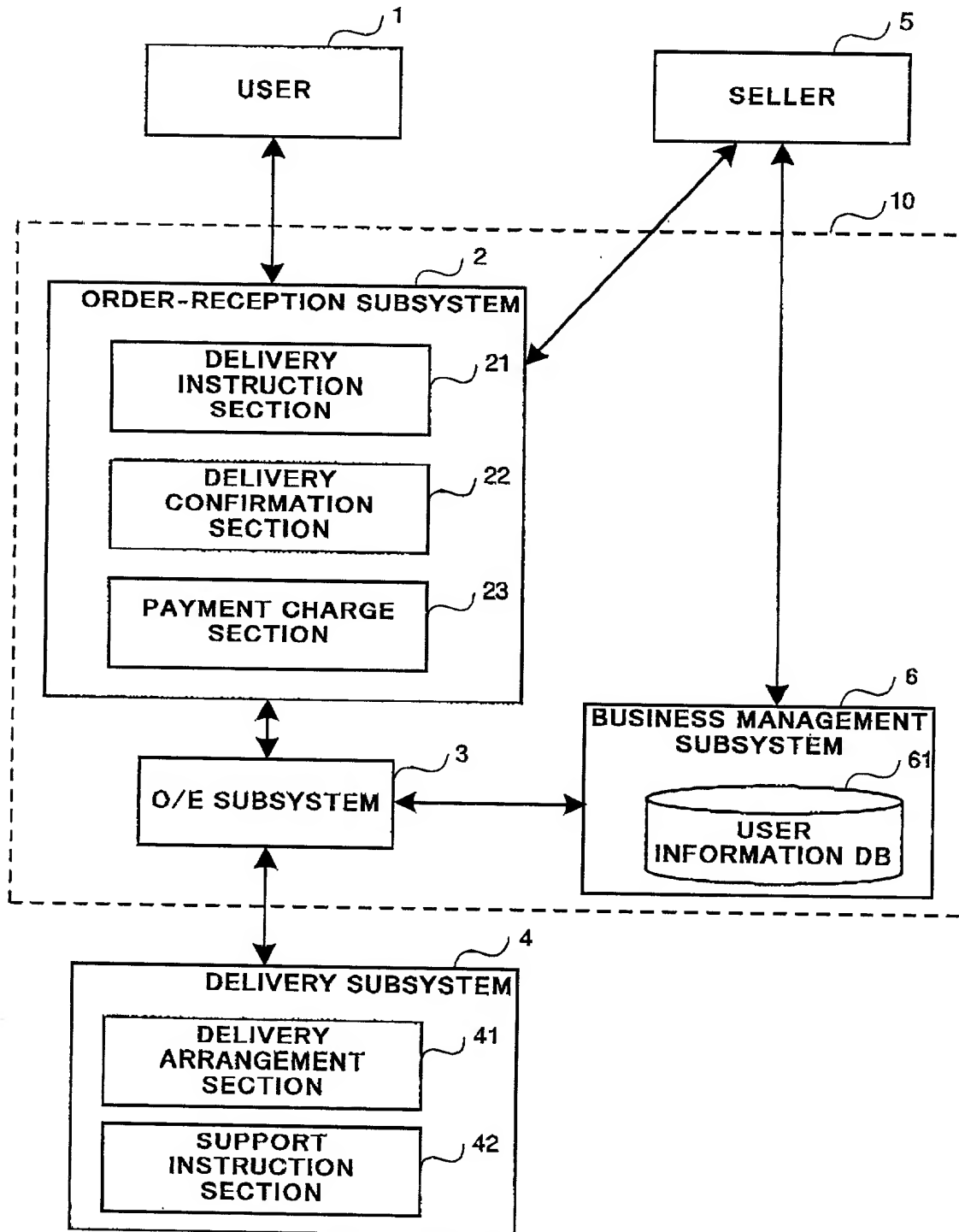
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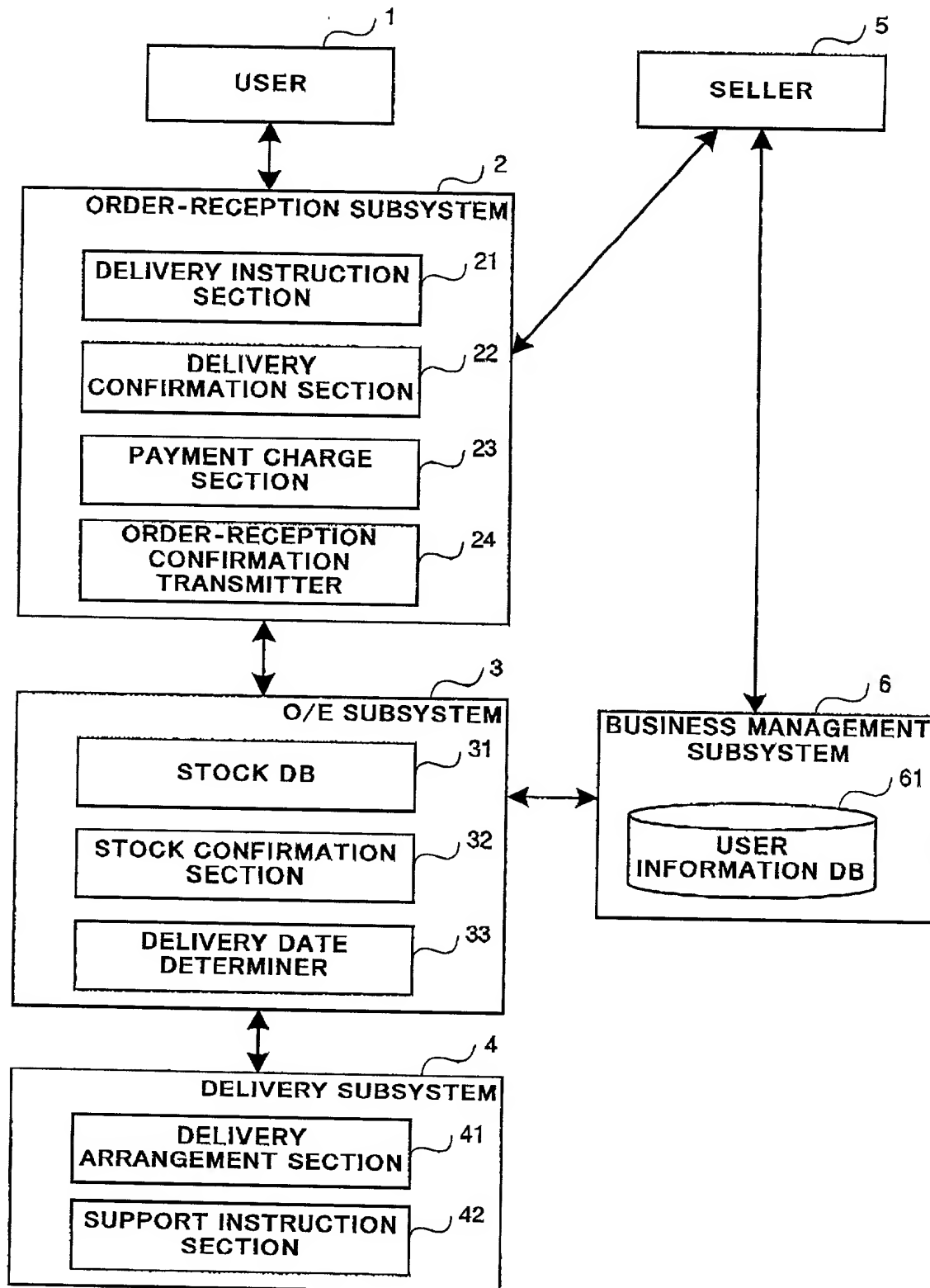
FIG. 4



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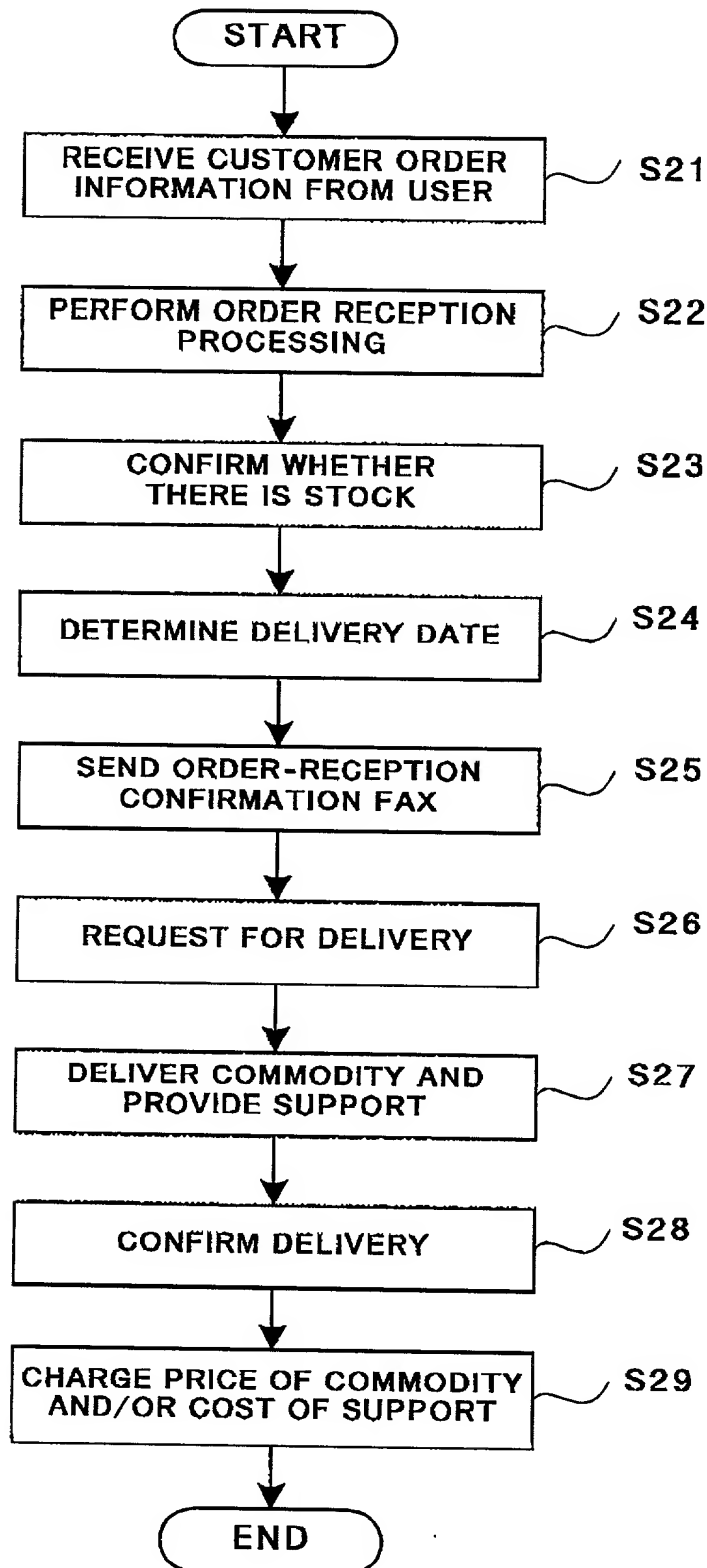
FIG. 5



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FIG. 6

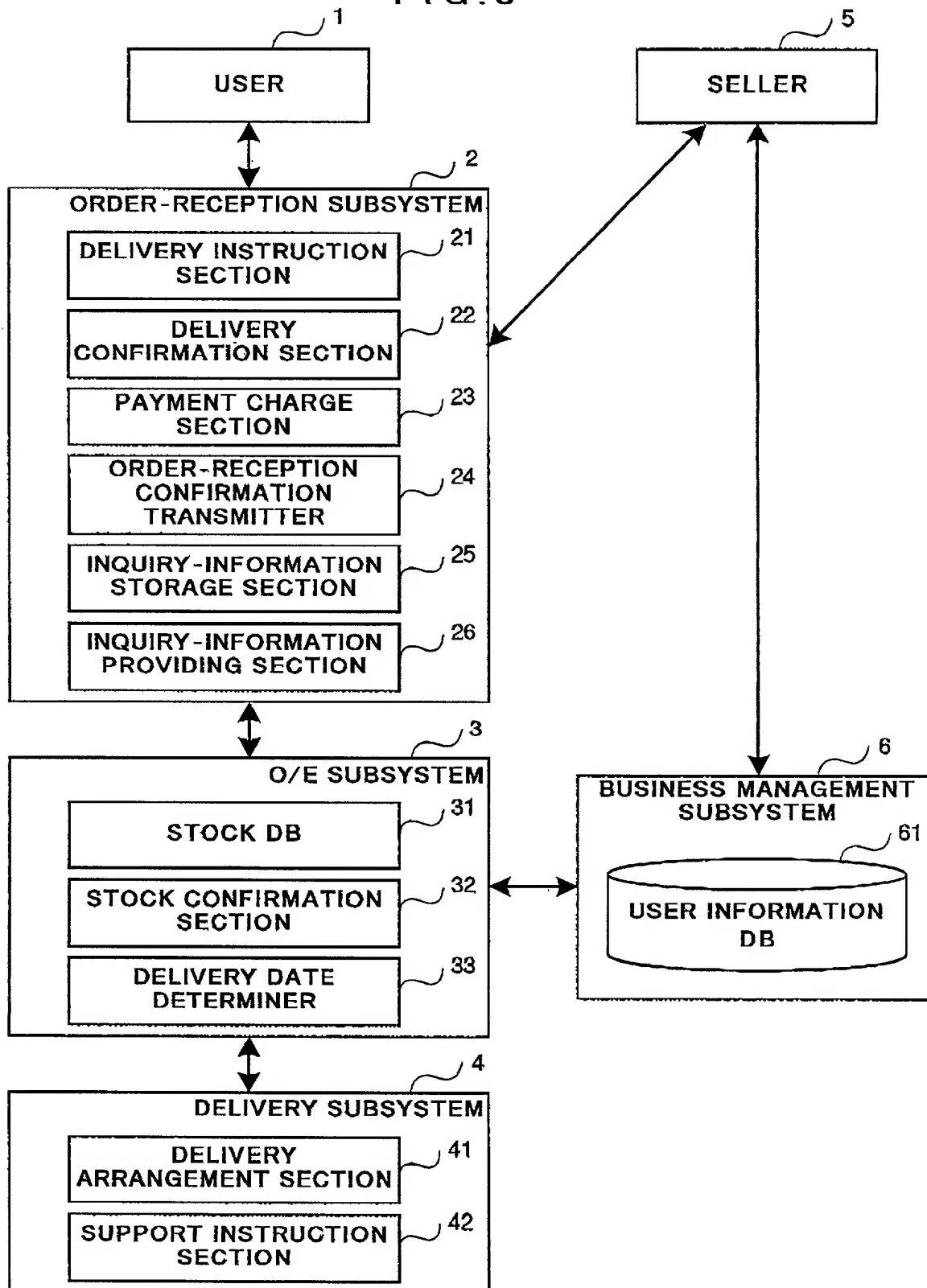
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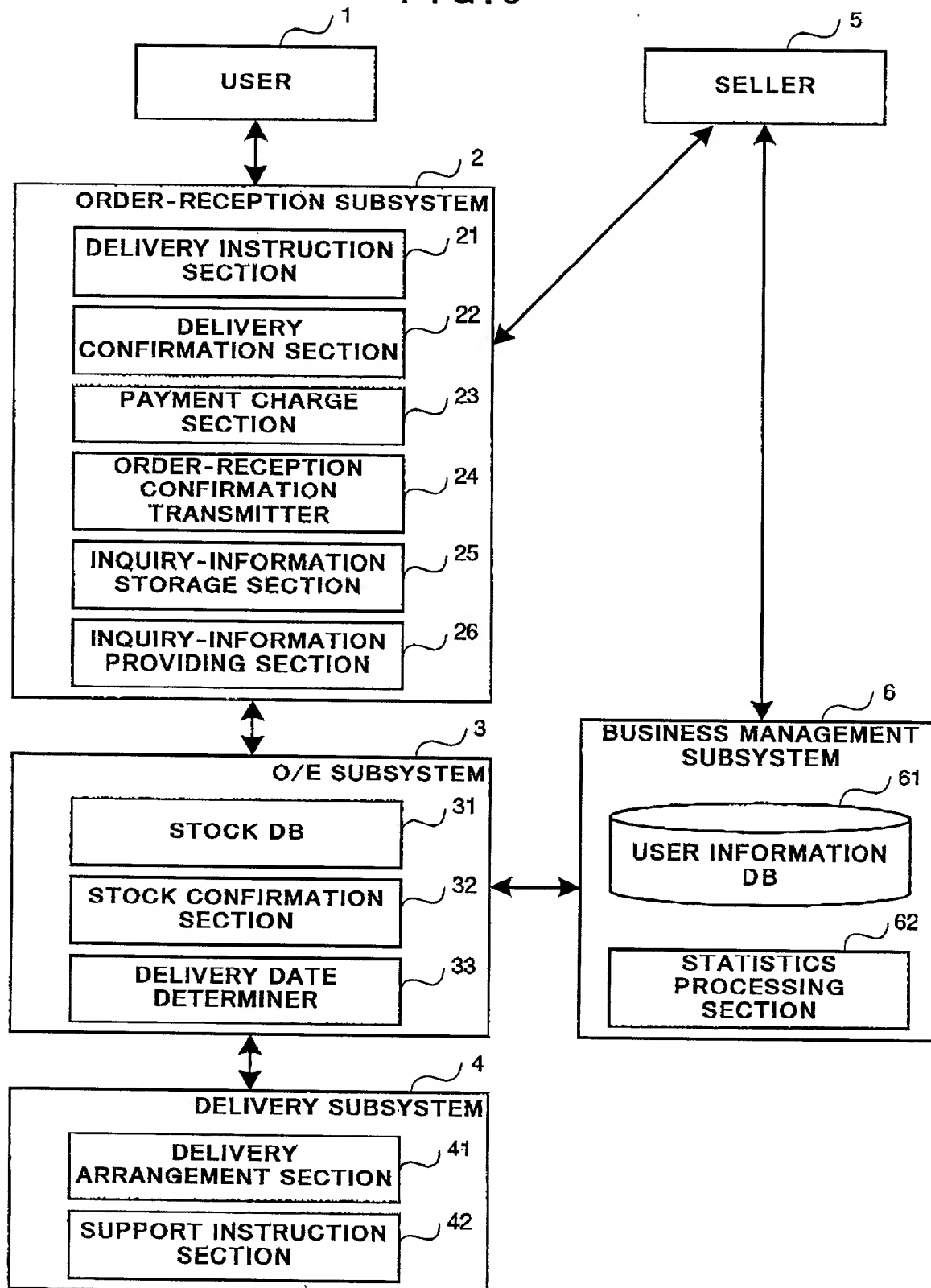
FIG. 7



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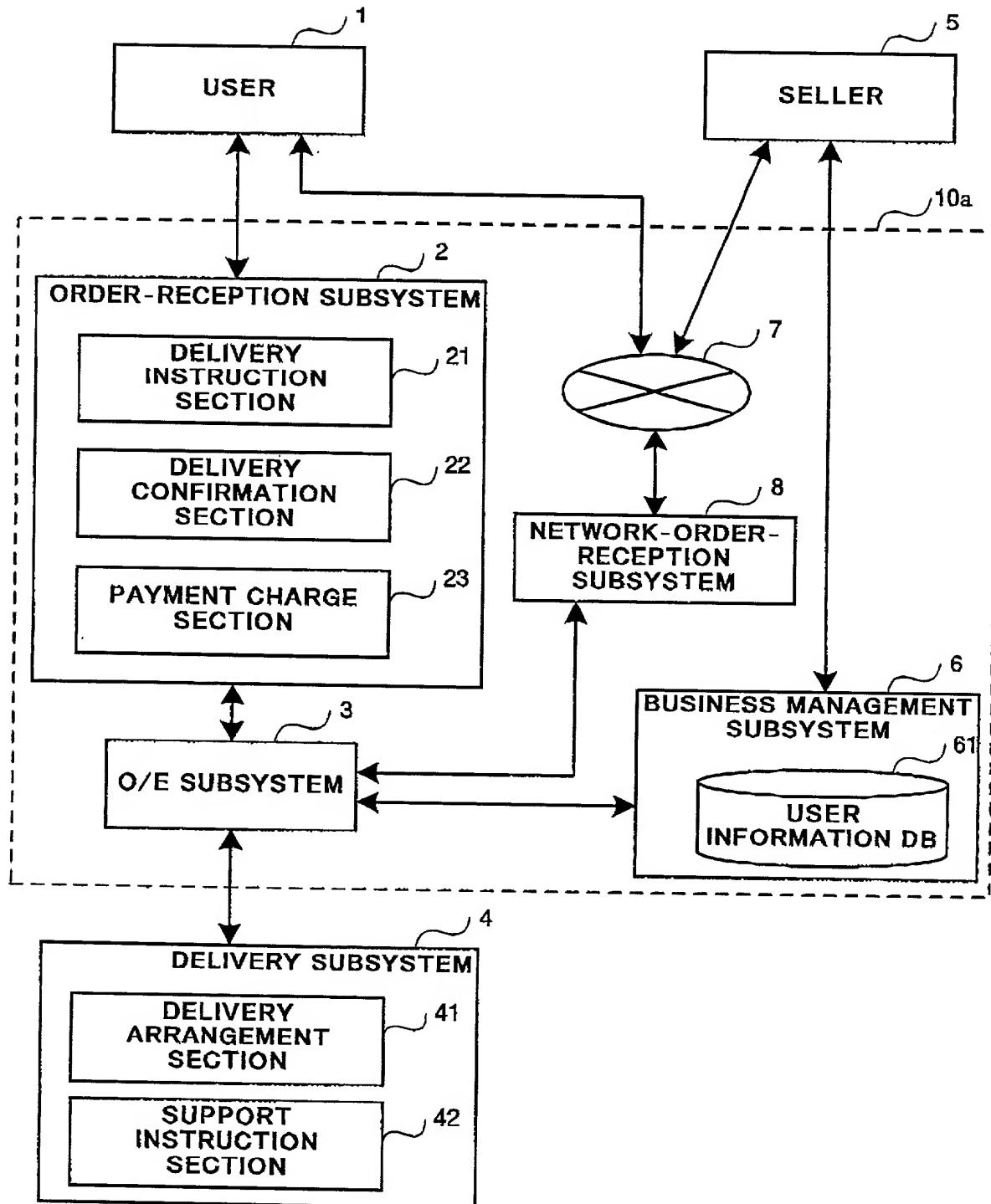
FIG. 8



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FIG. 9

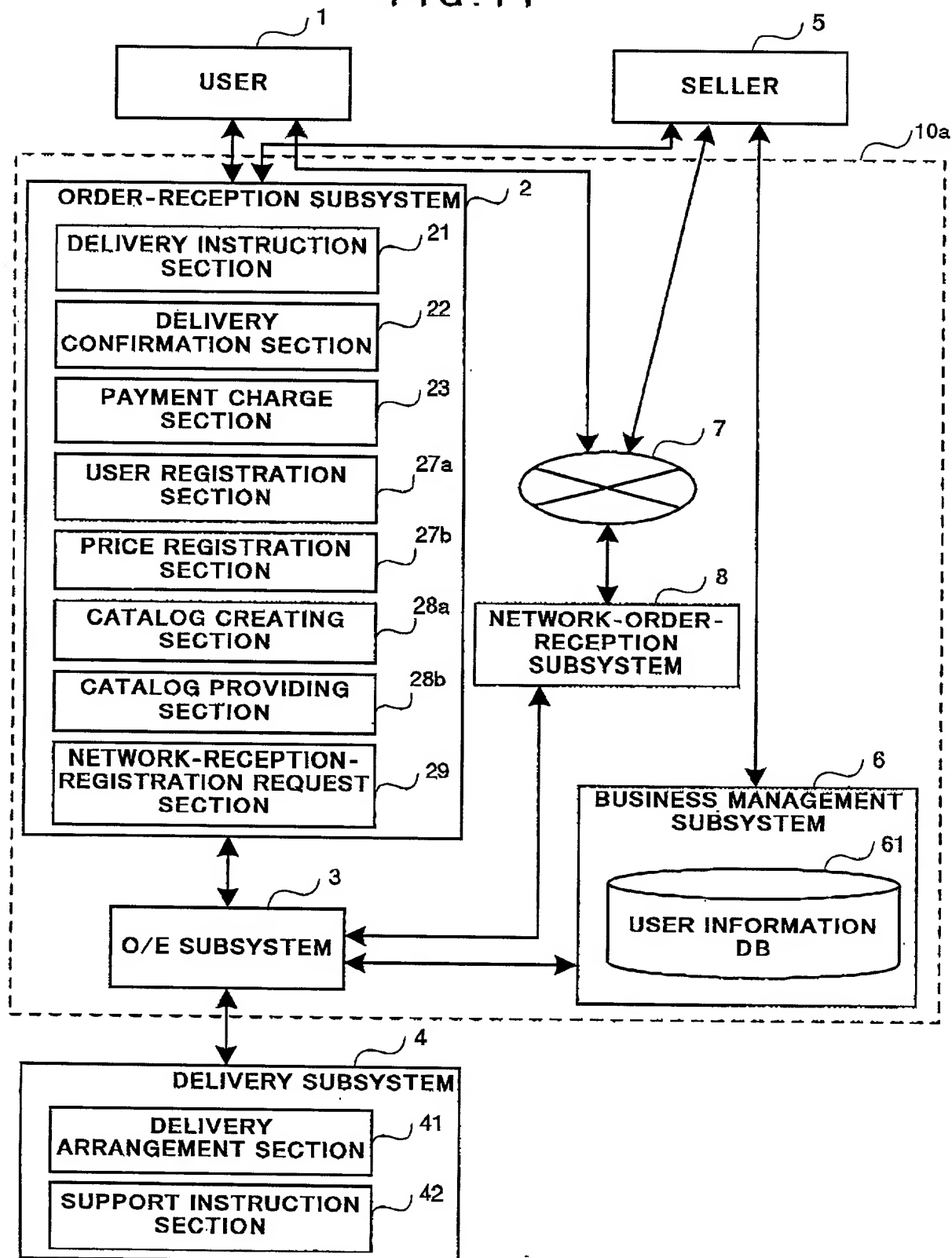
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FIG. 10



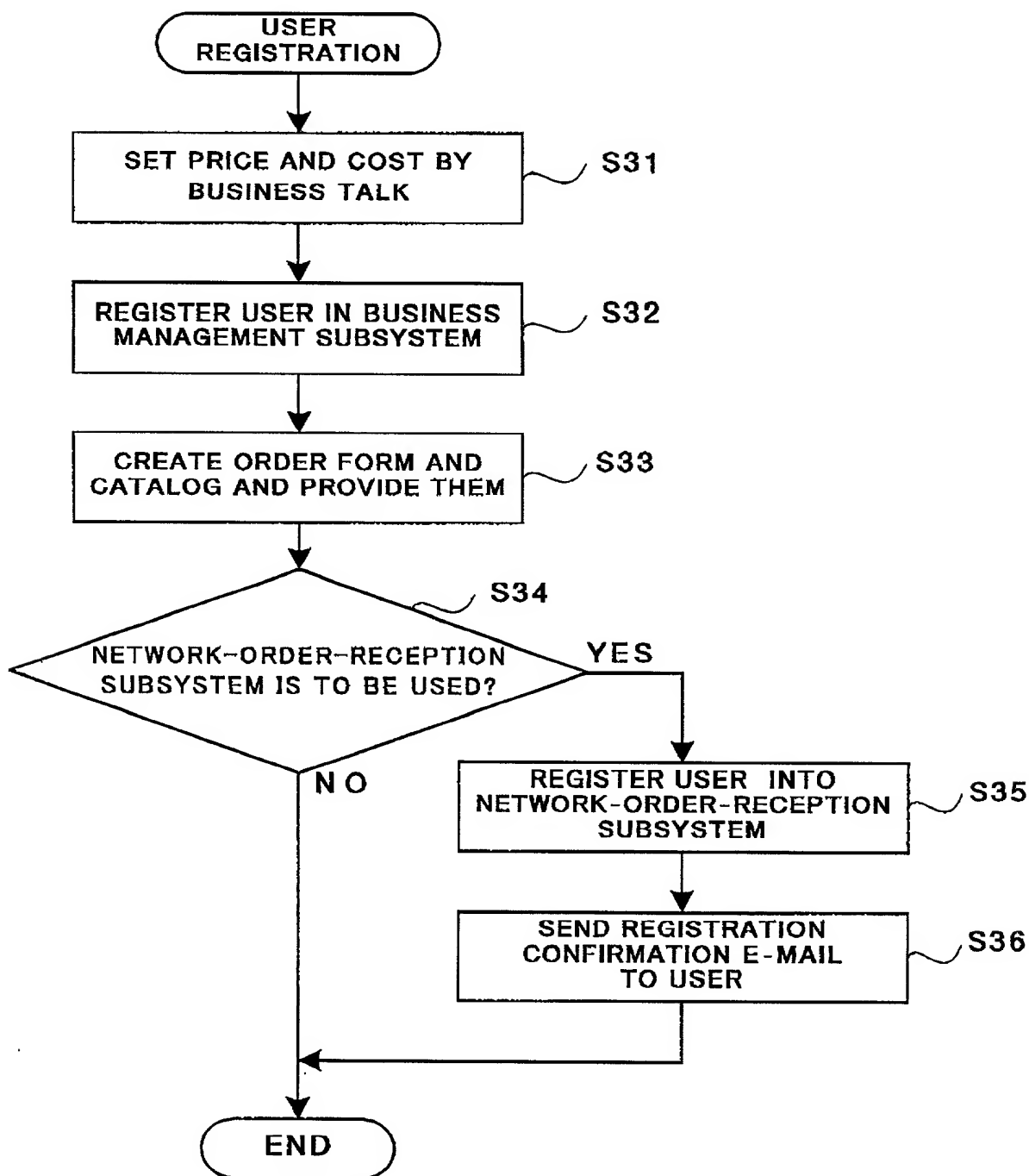
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FIG. 11



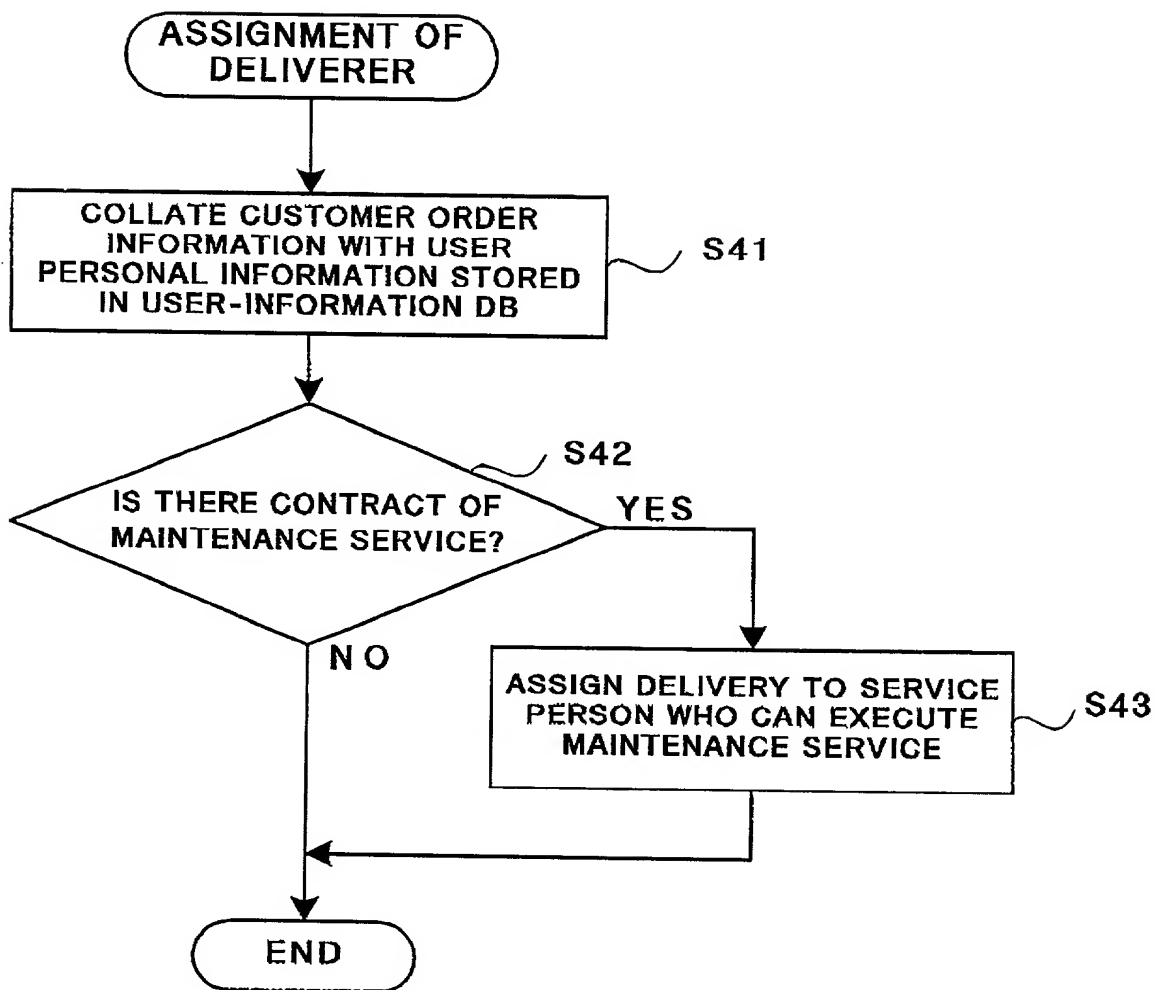
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FIG.12



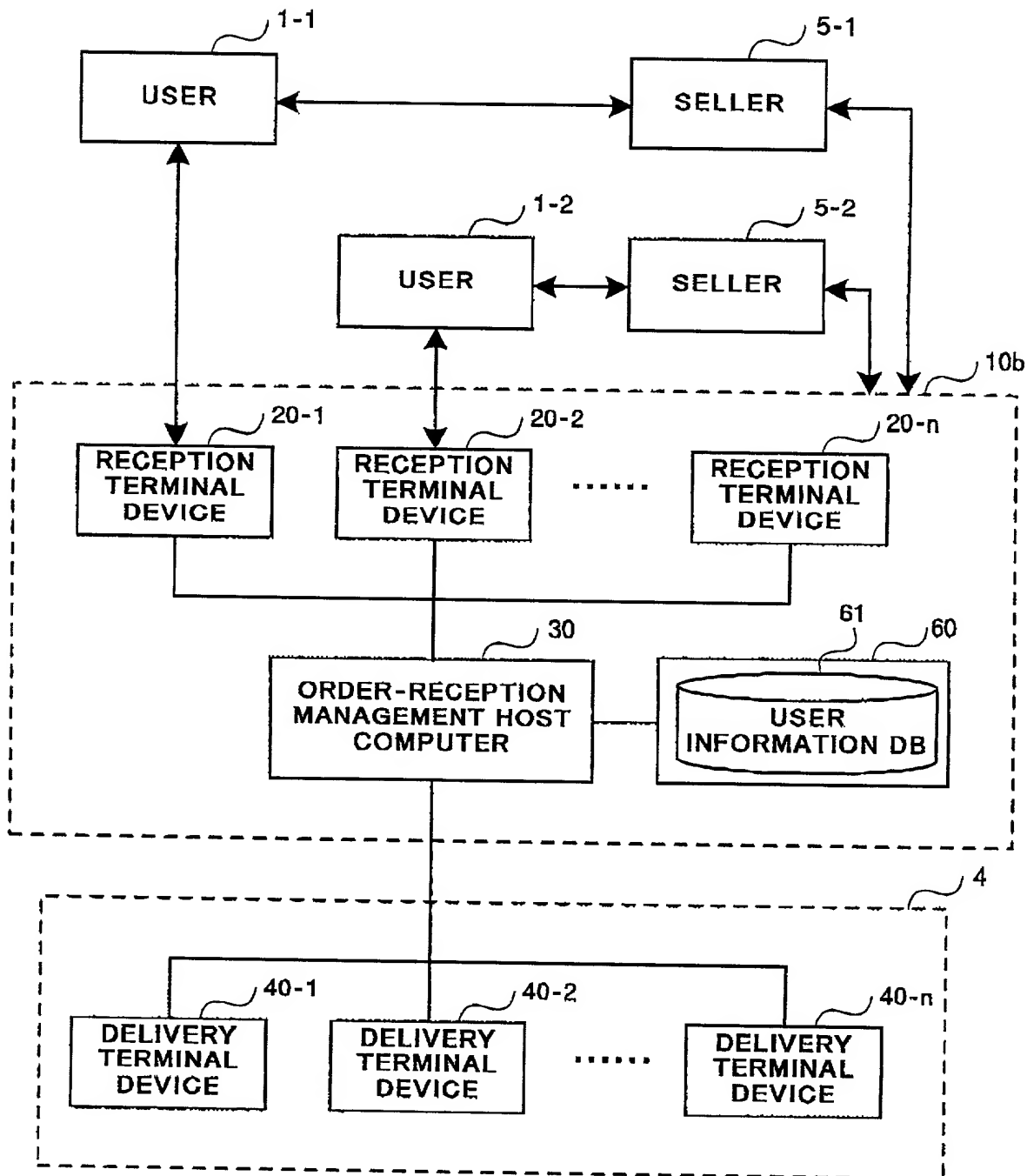
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FIG.13



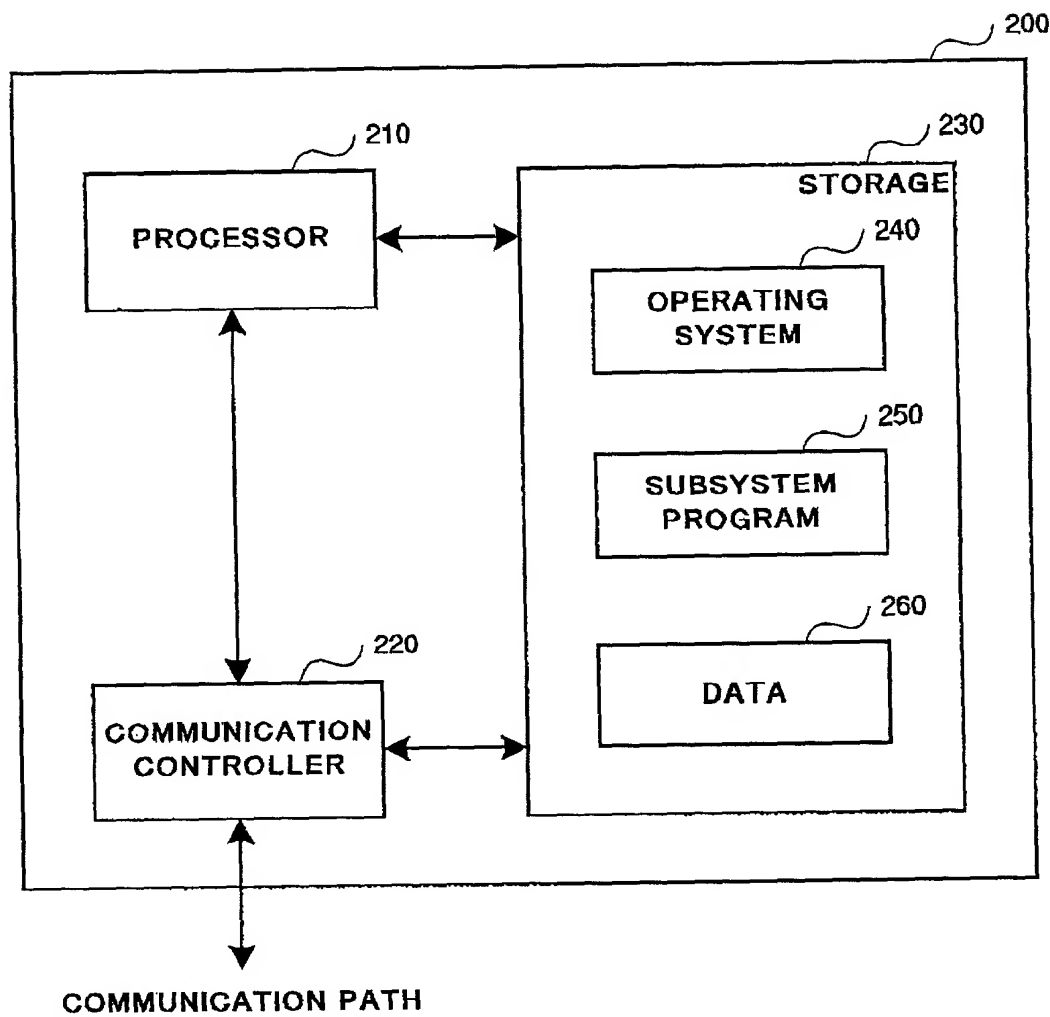
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FIG. 14



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FIG. 15



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FIG. 16 A

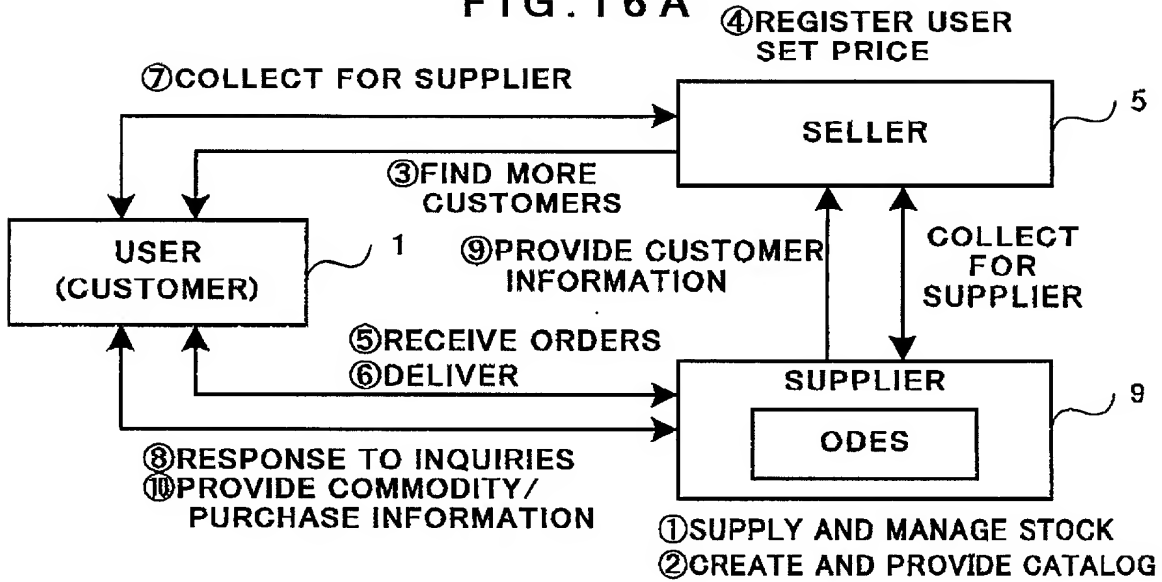
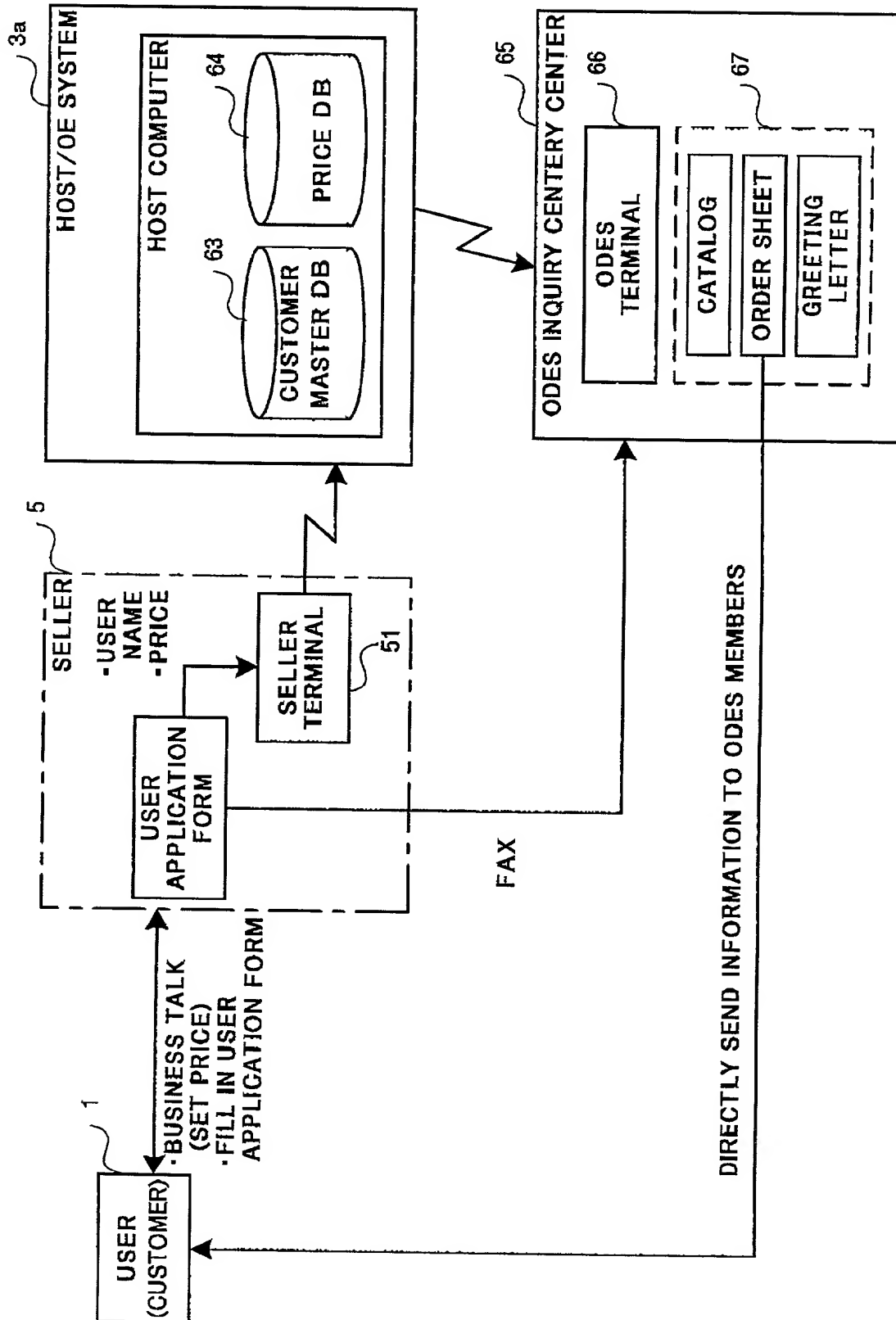


FIG. 16 B

	SELLER	SUPPLIER (ODES)
① SUPPLY AND MANAGE STOCK	—	*
② CREATE AND PROVIDE CATALOG	—	*
③ SALES (FIND MORE CUSTOMERS)	*	—
④ REGISTER USER, SET PRICE	*	—
⑤ RECEIVE AND CONFIRM ORDERS	—	*
⑥ DELIVER AND CONFIRM DELIVERY	—	*
⑦ COLLECT FOR SUPPLIER	*	—
⑧ RESPONSE TO INQUIRIES	—	*
⑨ PROVIDE CUSTOMER INFORMATION	—	*
⑩ PROVIDE COMMODITY/ PURCHASE INFORMATION	—	*

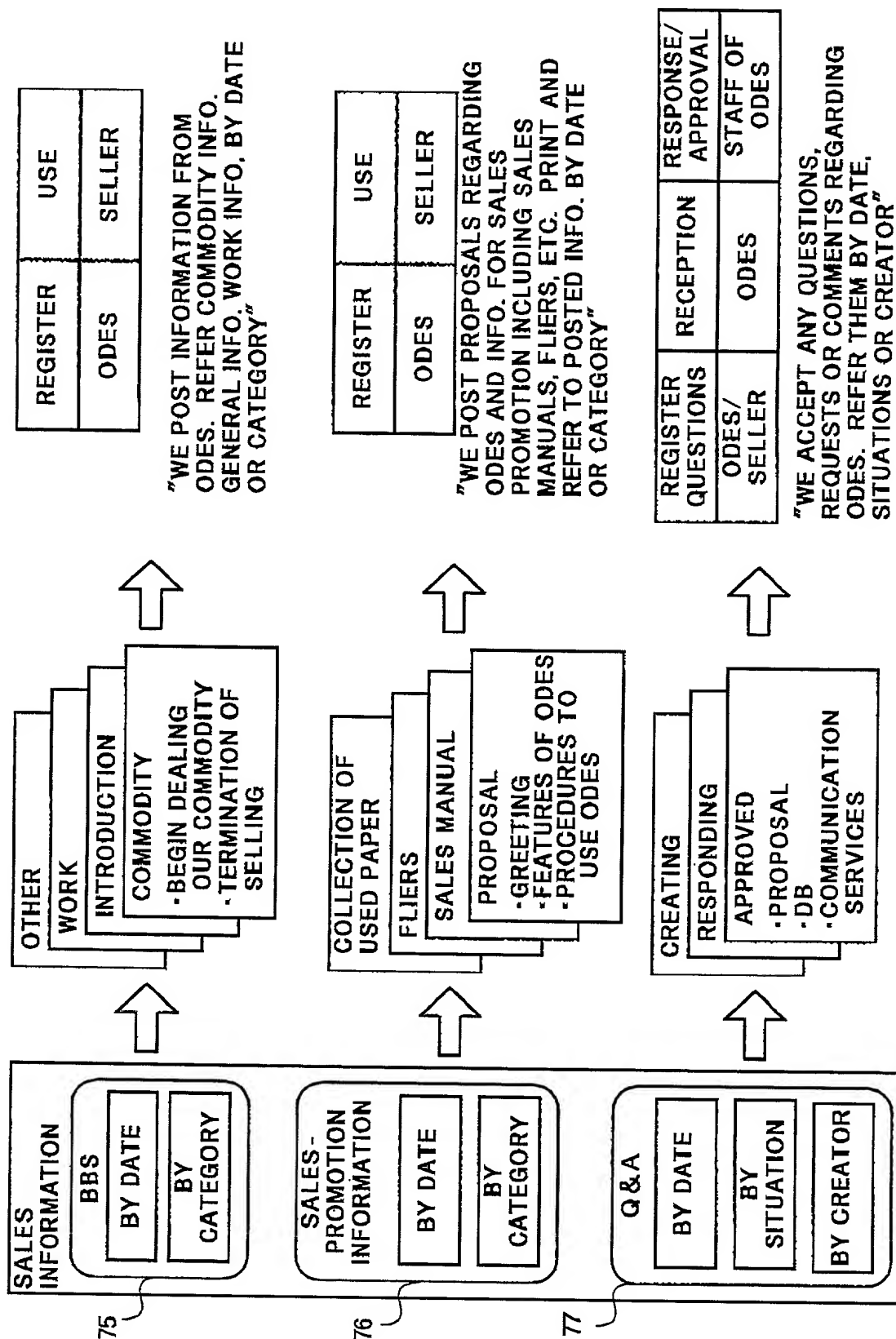
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FIG. 17



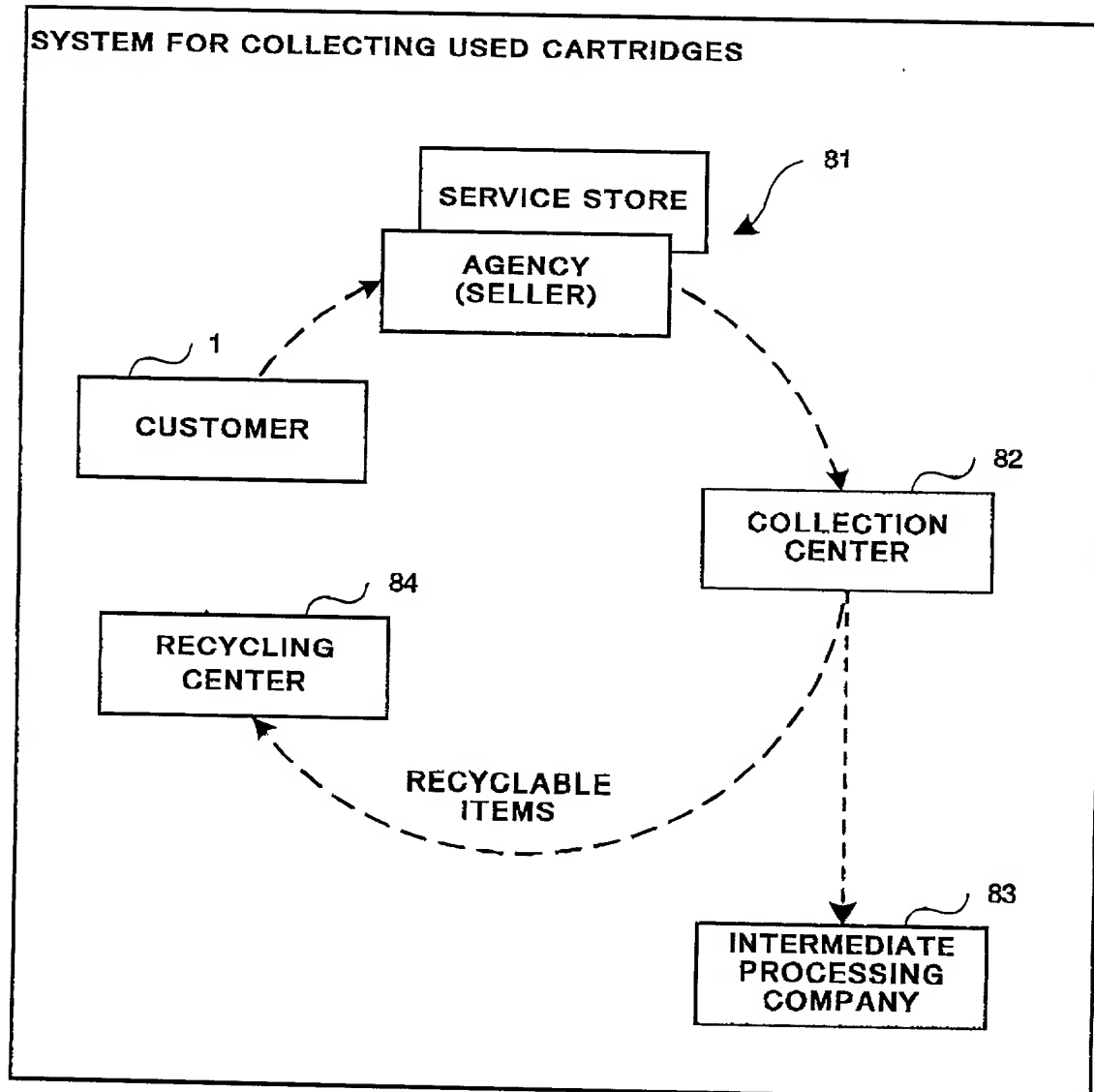
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FIG. 19



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FIG. 20



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FIG. 21

ODES USER APPLICATION FORM		
※FILL IN BLANKS		
※DATE OF APPLICATION <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		
WE CONSENT TO ODES MEMBER AGREEMENT, APPLY FOR USING ODES SYSTEM, AND SIGN HERE		
※CUSTOMER PHONE NO. <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	※CUSTOMER FAX NO. <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	※E-MAIL ADDRESS OF ORDERING STAFF <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
※		
CUSTOMER COMPANY NAME		SECTION NAME
NAME OF PERSON IN CHARGE	NAME OF PERSON MAKING ORDER	
SIGNATURE	SIGNATURE	
PLACE TO DELIVER		
(SHOULD BE FILLED IN BY SALES PERSON AFTER TALK WITH CUSTOMER)		
FREQUENTLY-PURCHASED COMMODITY		
CODE NUMBER	COMMODITY NAME	PRICE RATE(%)
DESIRED DELIVERY PATTERN	ONE DAY	HALF DAY
REQUEST FOR RETURN SERVICE	YES	NO
TERMS OF PAYMENT	EVERY MONTH	PERIOD DATE
PAYMENT METHOD 1.TRANSFER		
2.BANK ACCOUNT 3.CASH		
4. OTHER()		
MANAGEMENT ITEM		
CUSTOMER CODE <div style="display: flex; gap: 5px;"> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> </div>		
SPECIAL NOTE (DELIVERY CONDITION, ETC)		SELLER NAME
		STAFF IN CHARGE
		PHONE NUMBER
CREATED BY _____		
APPROVED BY _____		
INPUT BY _____		


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FIG.22

※)FILL IN BLANKS		ODES USER		APPLICATION FORM		FOR SELLER	
※DATE OF APPLICATION		WE CONSENT TO ODES MEMBER AGREEMENT, APPLY FOR USING ODES SYSTEM, AND SIGN HERE					
<input style="width: 100%;" type="text"/>							
※CUSTOMER PHONE NO.		※CUSTOMER FAX NO.		※E-MAIL ADDRESS OF ORDERING STAFF			
<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>			
※							
CUSTOMER COMPANY NAME				SECTION NAME			
NAME OF PERSON IN CHARGE				NAME OF PERSON MAKING ORDER			
SIGNATURE				SIGNATURE			
PLACE TO DELIVER							
(SHOULD BE FILLED IN BY SALES PERSON AFTER TALK WITH CUSTOMER) FREQUENTLY-PURCHAED COMMODITY							
CODE NUMBER	COMMODITY NAME	PRICE RATE(%)	CODE NUMBER	COMMODITY NAME	PRICE RATE(%)		
DESIRED DELIVERY PATTERN		ONE DAY	HALF DAY	REQUEST FOR RETURN SERVICE		YES	NO
TERMS OF PAYMENT	EVERY MONTH	PERIOD DATE		CUSTOMER PROFILE WRITTEN BY SALES PERSON WRITE SELLERS BEFORE ODES			
PAYMENT METHOD	1. TRANSFER		OUR TONER() OTHER TONER() PAPER() 1. OURS 2. ABC 3. XYZ 4. ELSE				
2. BANK ACCOUNT	3. CASH						
4. OTHER())						
MANAGEMENT ITEM							
CUSTOMER CODE <input style="width: 100%;" type="text"/>							
SPECIAL NOTE (DELIVERY CONDITION, ETC)				SELLER NAME			
				STAFF IN CHARGE			
				PHONE NUMBER			
CUSTOMER SIZE (NUMBER OF WORKERS)				CREATED BY _____			
L2(1000-) L1(300-999) M2(100-299)				APPROVED BY _____			
M1(30-99) S2(5-29) S1(1-4)				INPUT BY _____			

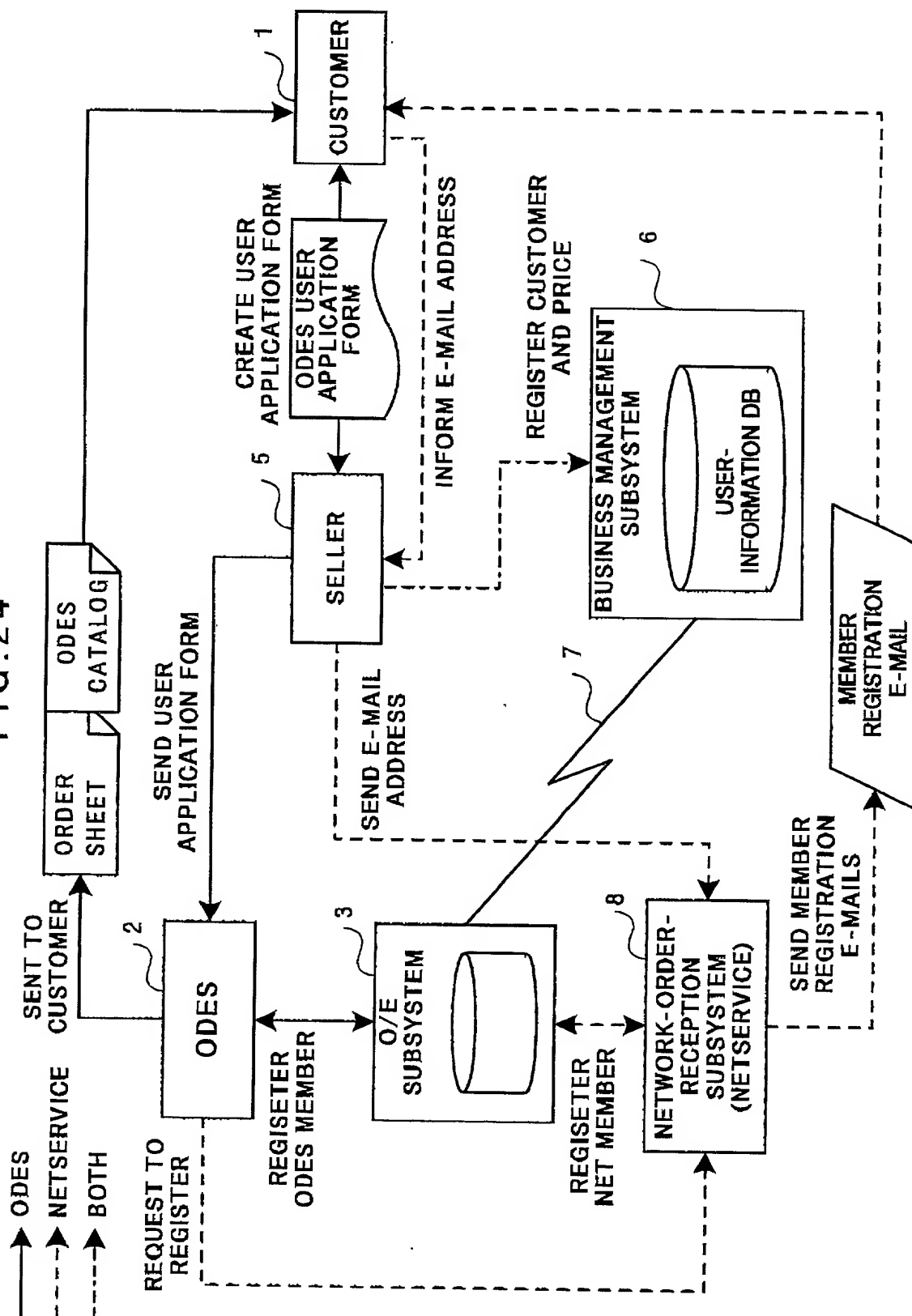
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FIG. 23

 FAX TO THIS DIRECTION		ODES ORDER SHEET		100	SHEET NO. (/)
DATE OF ORDER		SELLER	TTT INC.		408
CUSTOMER NAME					
CUSTOMER CODE					
CUSTOMER PHONE NO.					
PLACE TO DELIVER					
PHONE NO. OF THE PLACE					
PERSON MAKING ORDER					
ORDER NUMBER					
SAMPLE					
901300		MY PAPER A3		10	CASE
CODE NUMBER		COMMODITY NAME	QUANTITY	UNIT	
1	339191	RIFAX TONER MAGAZINE TYPE 3		PIECE	
2	339677	STAMP CARTRIDGE TYPE 1		CASE	
3	614603	RIFAX TONER MAGAZINE TYPE 2		PIECE	
4	639746	RIFAX TONER TYPE2000 120G		PIECE	
5					
6					
7					
8					
9	444501	COLLECT USED CARTRIDGES			
10	444502	COLLECT USED TONER CONTAINERS			
COMMENT					
PLEASE SPECIFY ODES SUPPORT MENU(PARTLY CHARGE TO CUSTOMER) <input type="checkbox"/> UNPACKING DELIVERY·COLLECT EMPTY BOX <input type="checkbox"/> COMMODITY REPLACEMENT (FIRST IN FIRST OUT)(2\$) <input type="checkbox"/> DELIVERY TO SPECIFIED RACK(FREE)					
DESIRED DELIVERY DATE					
·PLEASE CONFIRM THE CONTENTS BEFORE ORDER ·PLEASE INQUIRY TO ODES INQUIRY CENTER(1-800-XXX-ODES) OR DEALER. ·FAX NO. FOR ORDER 1-800-YYY-ODES					

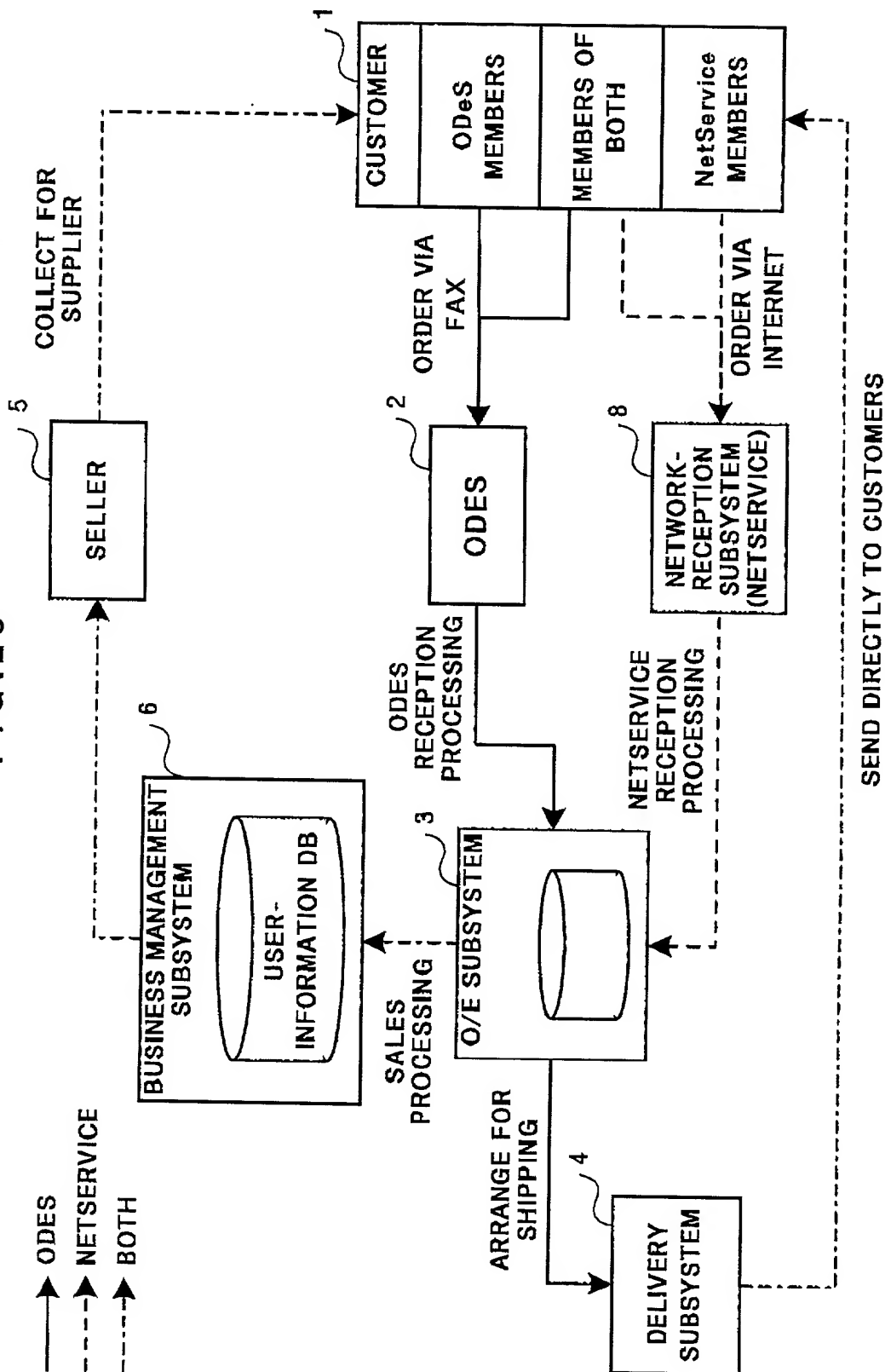
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FIG. 24



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FIG. 25



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FIG. 26

SALES INFORMATION BY CUSTOMER
SALES INFORMATION BY DEPOT
INFORMATION REGARDING ORDERS BY CUSTOMER
SALES INFORMATION AND ACCOUNT OF TONER (ACQUIRING FROM OTHER COMPANIES)
PURCHASE HISTORY OF EACH CUSTOMER
ODES SALES AND GROSS MARGIN INFORMATION
SALES INFORMATION BY COMMODITY GROUP
INFORMATION REGARDING NUMBER OF ACCOUNTS FOR ORDERS AND REGARDING TOTAL NUMBER OF ORDERS MADE BY CUSTOMERS
INFORMATION REGARDING NEW SUPPLY COMMODITY (BOTH OWN COMPANY AND OTHER COMPANIES)
CUSTOMER CLAIMING INFORMATION
CUSTOMER INQUIRY INFORMATION
NEW MACHINE INFORMATION
OTHER INFORMATION

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FIG. 27

